

# The City of Troy

## Barricade Permit Application

Location of Work: \_\_\_\_\_

Applicant: \_\_\_\_\_

Owner: \_\_\_\_\_

Contractor: \_\_\_\_\_

Time Frame: To: \_\_\_\_\_ From: \_\_\_\_\_

Reason for Barricade Permit:

☐ Dumpster \*Clean out only, Rehab work separate permit

☐ Moving POD

☐ Lift/ Scaffolding Type of work: \_\_\_\_\_

☐ Sidewalk Repair/Replacement

☐ Water/Sewer Line Repair/Installation

I hereby make application for issuance of a permit for work described above. I agree that no person will be employed without providing workers compensation and disability benefits law coverage, as required by state law, and that all applicable ordinances of the City shall be complied with. I declare. Subject to penalty of perjury that statements made herein are true and correct to the best of my knowledge.

☐ OWNER APPLICANT'S SIGNATURE \_\_\_\_\_

☐ CONTRACTOR APPLICANT'S NAME (PRINT) \_\_\_\_\_

☐ OTHER \_\_\_\_\_ DATE \_\_\_\_\_